									Application or Docket Number						
PATENT APPLICATION FEE DETERMINATION RECOI															
Effective October 1, 2003										10772029					
CLAIMS AS FILED - PART I (Column 1) (Column 2)							umn 2)		SMALL ENTITY TYPE			OTHER THAN R SMALL ENTITY			
TOTAL CLAIMS					14		•		RATE	FEE	7	RATE	FEE ·		
FOR .				NUMBER FILED		NUM	NUMBER EXTRA		BASIC FE	E 385.00	OR	BASIC FEE	770.00		
TOTAL CHARGEABLE CLAIMS				24 minus 20=		. 41			XS 9=		OR	X\$18=	777		
INDEPENDENT CLAIMS				3 m	inus 3 =	•	0		X43=		OR	X86=	1.		
MULTIPLE DEPENDENT CLAIM PR				RESENT					+145=		OR	+290=			
* If the difference in column 1 is less t					s than zero, enter "0" in column 2				TOTAL	+	OR		842		
CLAIMS AS AMENDED - PART II												OTHER	T:		
(Column 1) (Column 2) (Column 3)							٠	SMALL	ENTITY	OR	SMALL				
AMENDMENT A	3/3/06	CLAIMS REMAINING AFTER AMENDMENT			HIGH NUM PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total		6	Minus	-2	4	. —		. XS 9=	/	OR	X\$18=			
	Independent			Miņus					X43=	/	OR	X86=	/		
	FIRST PRESE	NTATIO	ON OF MU	JLTIPLE DE	PENDENT	CLAIM			+145=	/	OR	+290=			
				•		•		. 1	JOTAL		OB	TOTAL			
8	122/6	. (Coi	, ນຕາກ 1)		(Colum	nn 21	(Column 3)		ADDIT. FEE		J O	ADDIT. FEE			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		٠	HIGH NUME PREVIO PAID F	EST BER USLY	PRESENT EXTRA		HATE	ADDI- TIONAL FEE	· .	RATE	ADDI- TIONAL FEE		
	Total	. (Minus	24		•/		. XS 9=		OR	X\$18=			
	Independent	•	(Minus	5) 	<u>ا</u>		X43=	·	OR	·X86=			
	FIRST PRESE	NIATIC	ON OF MU	ILTIPLE DEF	ENDENT	CLAIM			+1457		OR	+290=	•		
			•		•	•			TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE			
(Column 1) (Column 2) (Column 3)								,	•						
AMENOMENT C		CLAIMS REMAINING - AFTER AMENDMENT			HIGHE NUMBI PREVIOU PAID FI		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	•		Minus	••	•	5		X\$ 9=	•	OR	X\$18=			
	Independent			Minus			•	ŀ	X43=			X86=			
1	FIRST PRESE	NTATIC	N OF MU	LTIPLE DEP	ENDENT	CLAIM		ŀ			OR				
- 11	the entry in colur	nn 1 is k	ess than the	entry in colu	nn 2. write '	"O" in cob	umn 3.	L	+145=		OR	+290=			
11	the "Highest Nur the "Highest Nur	nber Pre	rviously Pai	d For IN THE	S SPACE is	less that	20, enter "20."	A	DDIT. FEE		OR,	TOTAL DOIT. FEE			
1	he Highest Num	ber Prev	riously Paid	For (Total or	Independer	nd) is the	highest number	fou	nd in the ap	propriate box	in col	ımn 1.	. [